

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

ALTERED PROTEIN EXPRESSION IN HYPOXIC TROPHOBLASTS

the specification of which (check only one item below):

☐ is attached hereto.

☐ was filed as United States application

Serial No. _____

on _____,

and was amended

on _____ (if applicable).

☒ was filed as PCT international application

Number PCT/US96/05441

on April 18, 1996

and was amended under PCT Article 19

on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY (If PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
US	08/423,409	April 18, 1995	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO

ATTORNEY'S DOCKET NUMBER
02307E-060010US

PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120:

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

Send Correspondence to: Tom Hunter
Townsend and Townsend and Crew LLP
Two Embarcadero Center, 8th fl
San Francisco, CA 94111

201	FULL NAME OF INVENTOR	FAMILY NAME FISHER	FIRST GIVEN NAME Susan	SECOND GIVEN NAME J.
	RESIDENCE & CITIZENSHIP	CITY San Francisco	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP US
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 1347 4th Avenue	CITY San Francisco	STATE & ZIP CODE/COUNTRY California 94122
202	FULL NAME OF INVENTOR	FAMILY NAME GENBACEV	FIRST GIVEN NAME Olga	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Mountain View	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP YU
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 1050 Crestview Drive #45G	CITY Mountain View	STATE & ZIP CODE/COUNTRY California 94040
203	FULL NAME OF INVENTOR	FAMILY NAME FOULK	FIRST GIVEN NAME Russell	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY <i>Reno</i> Pacific	STATE OR FOREIGN COUNTRY California <i>Nevada</i>	COUNTRY OF CITIZENSHIP US
	POST OFFICE ADDRESS	POST OFFICE ADDRESS <i>2189</i> 740 Alta Vista <i>Maxfli</i>	CITY Pacific <i>Reno</i>	STATE & ZIP CODE/COUNTRY <i>Nevada</i> California 94044 <i>89523</i>

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
DATE	DATE	DATE

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120:

U.S. APPLICATIONS			STATUS (Check one)		
U.S. APPLICATION NUMBER	U.S. FILING DATE		PATENTED	PENDING	ABANDONED
PCT APPLICATIONS DESIGNATING THE U.S.					
PCT APPLICATION NO.	PCT FILING DATE	U.S. SERIAL NUMBERS ASSIGNED (if any)			

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

Kenneth A. Weber, Reg. No. 31,677
Tom Hunter, Reg. No. 38,498

Send Correspondence to: Tom Hunter
Townsend and Townsend and Crew LLP
Two Embarcadero Center, 8th fl.
San Francisco, CA 94111

Direct Telephone Calls to:
(name and telephone number)
Tom Hunter
415-576-0200

201	FULL NAME OF INVENTOR	FAMILY NAME <u>FISHER</u>	FIRST GIVEN NAME <u>Susan</u>	SECOND GIVEN NAME <u>J.</u>
	RESIDENCE & CITIZENSHIP	CITY <u>San Francisco</u> <u>CA</u>	STATE OR FOREIGN COUNTRY <u>California</u>	COUNTRY OF CITIZENSHIP <u>US</u>
	POST OFFICE ADDRESS	POST OFFICE ADDRESS <u>1347 4th Aveune</u>	CITY <u>San Francisco</u>	STATE & ZIP CODE/COUNTRY <u>California 94122</u>
202	FULL NAME OF INVENTOR	FAMILY NAME <u>GENBACEV</u>	FIRST GIVEN NAME <u>Olga</u>	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY <u>Mountain View</u> <u>CA</u>	STATE OR FOREIGN COUNTRY <u>California</u>	COUNTRY OF CITIZENSHIP <u>YU</u>
	POST OFFICE ADDRESS	POST OFFICE ADDRESS <u>1050 Crestview Drive</u> <u>#45G</u>	CITY <u>Mountain View</u>	STATE & ZIP CODE/COUNTRY <u>California 94040</u>
203	FULL NAME OF INVENTOR	FAMILY NAME <u>FOULK</u>	FIRST GIVEN NAME <u>Russell</u>	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY <u>Pacifica</u> <u>CA</u>	STATE OR FOREIGN COUNTRY <u>California</u>	COUNTRY OF CITIZENSHIP <u>US</u>
	POST OFFICE ADDRESS	POST OFFICE ADDRESS <u>740 Alta Vista</u>	CITY <u>Pacifica</u>	STATE & ZIP CODE/COUNTRY <u>California 94044</u>

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
DATE <u>5/12/82</u>	DATE <u>6/9/82</u>	DATE

01/05/98 MON 11:01 FAX 415 576 0300

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204	FULL NAME OF INVENTOR	FAMILY NAME CLAUSER	FIRST GIVEN NAME Karl	SECOND GIVEN NAME R.
	RESIDENCE & CITIZENSHIP	CITY San Bruno CA	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP US
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 3200 Treetops Circle	CITY San Bruno	STATE & ZIP CODE/COUNTRY California 94066
205	FULL NAME OF INVENTOR	FAMILY NAME BURLINGAME	FIRST GIVEN NAME Alma	SECOND GIVEN NAME L.
	RESIDENCE & CITIZENSHIP	CITY Sausalito CA	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP US
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 26 Alexander Avenue	CITY Sausalito	STATE & ZIP CODE/COUNTRY California 94965
206	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.</p>				
SIGNATURE OF INVENTOR 204		SIGNATURE OF INVENTOR 205		SIGNATURE OF INVENTOR 206
DATE 1/5/98		DATE		DATE

204	FULL NAME OF INVENTOR	FAMILY NAME CLAUSER	FIRST GIVEN NAME Karl	SECOND GIVEN NAME R.
	RESIDENCE & CITIZENSHIP	CITY San Bruno	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP US
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 3200 Treetops Circle	CITY San Bruno	STATE & ZIP CODE/COUNTRY California 94066
205	FULL NAME OF INVENTOR	FAMILY NAME BURLINGAME	FIRST GIVEN NAME Alma	SECOND GIVEN NAME L.
	RESIDENCE & CITIZENSHIP	CITY Sausalito	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP US
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 26 Alexander Avenue	CITY Sausalito	STATE & ZIP CODE/COUNTRY California 94965
206	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
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SIGNATURE OF INVENTOR 204		SIGNATURE OF INVENTOR 205		SIGNATURE OF INVENTOR 206
DATE		DATE 11/5/98		DATE

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